

LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.
Registrations expire on January 31 unless a renewal is submitted between December 1 and January 31.

Lobbyist's Registration Number

Instructions

- Print in ink or type.
- Complete form, have it notarized and return with \$10 registration fee to the Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge, LA 70809-7017, (504) 922-1400.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Renewals must be submitted between December 1 and January 31.

FOR OFFICE USE ONLY

Postmark Date: 1/7/98

REG

1300835

✓ # 60922
9/10/00
10 mi

1. NAME TOOMAN, LEE D., JR.
Last First MI
2. BUSINESS PHONE 317 2974123
Area Code and Phone Number
3. BUSINESS ADDRESS 7440 WOODLAND DR. INDIANAPOLIS IN 46278
Street and No. City State Zip
4. EMPLOYER GOLDEN RULE INSURANCE CO.
5. EMPLOYER'S ADDRESS 712 ELEVENTH ST. LAWRENCEVILLE IL 62439
Street and No. City State Zip
6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.
1. Name GOLDEN RULE INSURANCE CO.
Address 712 ELEVENTH ST. LAWRENCEVILLE IL 62439
Business or purpose LIFE & HEALTH INSURANCE
Does this person pay you? Yes
If No, who pays you? _____
2. Name _____
Address _____
Business or purpose _____
Does this person pay you? _____
If No, who pays you? _____

HAND DELIVERED

LOBBYING REGISTRATION FORM

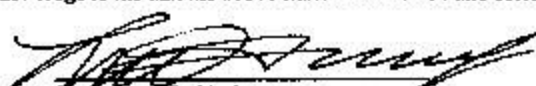
Lobbyist's Registration Number

3. Name _____
Address _____
Business or purpose _____
Does this person pay you? _____
If No, who pays you? _____
4. Name _____
Address _____
Business or purpose _____
Does this person pay you? _____
If No, who pays you? _____
5. Name _____
Address _____
Business or purpose _____
Does this person pay you? _____
If No, who pays you? _____

State of INDIANA

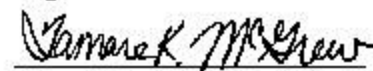
Parish of COUNTY OF MARION

Before me, the undersigned authority, personally came and appeared LEE D. TOOMAN, Jr., who, after being duly sworn by me, did declare and acknowledge to me that the above statements are true and correct.


Signature of Lobbyist

Sworn to and subscribed before me on this 29th day of

December, 1997


Notary Public

Rev. 8/97

